

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Anthony D. Sandler

Title:

METHOD FOR PREDICTING TUMOR RECURRENCE.

Docket No.: 17023.032US1

Serial No.: 10/668,057

Filed: September 22, 2003

Due Date: July 3, 2007

Examiner: Sheela Jitendra Huff

Group Art Unit: 1643

Customer No.: 53137

Confirmation No.: 7283

Mail Stop Issue Fee

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

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VIKSNINS HARRIS & PADYS PLLP

Customer Number 53137

By: 


Ann S. Viksnins

Reg. No. 37,748

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Lynda Mau

Name



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PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
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Lynda Mau	(Depositor's name)
Lynda Mau	(Signature)
May 29, 2007	(Date)

53137 7590 04/03/2007
 VIKSNINS HARRIS & PADYS PLLP
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 ST. PAUL, MN 55111-1098
 05/31/2007 HGUTERA2 00000024 10668057
 01 FC:2501 700.00 OP
 02 FC:1504 300.00 OP
 03 FC:8001 30.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/668,057

09/22/2003

Anthony D. Sandler

17023.032US1

7283

TITLE OF INVENTION: METHOD FOR PREDICTING TUMOR RECURRENCE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

YES

\$700

\$300

\$0

\$1000

07/03/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
HUFF, SHEELA JITENDRA	1643	435-007230

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

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1 Viksnins Harris

2 E Padys PLLP

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

University of Iowa Research Foundation

Iowa City, Iowa

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Ann S. ViksninsDate May 26, 2007Typed or printed name Ann S. ViksninsRegistration No. 37,748

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